

# Frequently Asked Questions



## **What is KanCare?**

KanCare is the name of the new way you will receive Medicaid services. KanCare is managed care that combines health care (like doctor visits) with community long-term services and supports (like help in your home). You will choose a KanCare health plan that will provide your services.

## **What is managed care?**

Managed care is a way of providing health care and long-term services and supports through a health plan. In a health plan, a group of providers offers health care services and community long-term services and supports. Under managed care, your services are coordinated by your primary care doctor and a service coordinator.

## **What will change for me?**

Unless you are a person with an intellectual or developmental disability, all of the services covered through your medical card, including in-home and nursing home services will be coordinated and paid for by one of three KanCare health plans also known as managed care organizations (MCO). These KanCare health plans are Amerigroup, United and Sunflower.

## **When will KanCare begin?**

KanCare will begin January 1, 2013. Enrollment begins in November 2012.

## **Can I keep seeing my current doctor?**

As long as your doctor is on the provider list for the KanCare health plan you choose. All three KanCare health plans must try hard to sign up current Medicaid providers.

## **Can I change doctors?**

You can choose to go to any doctor on the provider list for the KanCare health plan you've chosen. You can change doctors any time, as long as the new doctor is on the health plan's provider list. Call your health plan if you want to choose a different doctor.

## **I take some important medicine. Can I still get that medicine?**

All KanCare health plans include prescription medicine. As long as your doctor prescribes that medicine, you can continue to take it. Your health plan may talk with your doctor about medicines that do the same thing, but may be cheaper. If the medicine is for a mental illness you can continue to get it.

## **Can I still get mental health services?**

Yes. All the mental health services provided now for people who get Medicaid will be available in KanCare.

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## **Can I still get substance use disorder treatment?**

Yes. All the substance use disorder services provided now for people who get Medicaid will be available in KanCare.

## **Can I still get rides to see my doctor?**

Yes. Each KanCare health plan will help you get to your doctor and other health care providers. They will give you a phone number to call to get a ride.

## **What is happening with HealthWave and Unicare and Coventry; does anything change for me?**

Yes, you'll be assigned to one of the three new KanCare health plans. Then you have a chance to decide if you want to stay with that health plan or choose one of the other two. The HealthWave name goes away. Unicare and Coventry will no longer manage any Kansas Medicaid services starting January 1, 2013.

## **What about HealthConnect?**

That program will end December 31, 2012.

## **What if I don't want to be in a KanCare health plan?**

Almost every Medicaid member will be in a KanCare health plan. There will be no copays and you could get additional services that are not provided now.

## **When do I choose a KanCare health plan?**

You will be assigned to one of the KanCare health plans. You will receive a letter telling you that in November. You will also be given information about the other two health plans that will explain what you need to do if you want to choose a different health plan. You will have from November to February 14, 2013 to decide if you want to change health plans.

## **How do I choose a KanCare health plan?**

You will have complete information in the packet you get in the mail. Read the packet carefully to see if the services you use are covered by the health plans. Check to see if the doctors and other providers you go to now are in the provider lists that come with the packet. Contact the health plans (their numbers will be in your packet) if you have questions about how they will take care of your special health care needs. Use all of the information to choose a health care plan that works best for you.

## **Are all three KanCare health plans the same?**

They all have to cover all the services in Medicaid now, but some of the extra services they provide will be different. They also have to provide service statewide.

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## **What if I have Medicare *and* Medicaid?**

If you are in both programs, you will use Medicare for many of your health care needs and prescription drugs, just as you did before. You will use KanCare for your Medicaid long-term service and support needs.

## **What if I don't need community long-term services and supports?**

You don't have to use them. If you need community long-term services and supports in the future –contact your health plan and ask to speak to your care manager.

## **What is a *care manager*?**

This is someone who works for the KanCare health plan. A care manager makes sure you get the medical care and community services you need to stay healthy and take care of any conditions you have, like diabetes or asthma.

## **Will I be able to continue to see special doctors?**

You will be able to see special doctors or other providers for treatment or follow-up if you need to.

## **Will I have to pay anything for services?**

If you have to pay a monthly premium now, you still will pay that premium unless your family's income changes. If the service you receive is a covered service, you will not have to pay anything for it. If you have a monthly client obligation to pay or must spend down to continue to receive Medicaid, you will still need to do that.

## **Will I be able to get dental services in KanCare?**

Children already receive dental services. That will continue. All three KanCare health plans will also provide dental exams, cleanings and x-rays for adults at least once a year.

## **Are there any other new services?**

Yes, each KanCare health plan will offer some other services and those will be explained to you in the information that will help you choose a health plan.

## **I am on a Home and Community Based Services (HCBS) waiver; will my waiver services change?**

If you are on the DD waiver, the KanCare health plans will not manage those services until January 2014. All other HCBS waiver services will be managed by the KanCare health plan you choose or are assigned to. When your plan of care is due for review, there might be changes, but the health plan care manager will make sure you get the services you need.

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## **My mother is in a nursing home; will anything change for her under KanCare?**

It should not, as long as the nursing home contracts with the KanCare health plan your mother chooses. The health plans must work to contract with all of the nursing homes.

## **I self-direct my HCBS waiver services; can I continue to do that?**

Yes and the KanCare health plan will help you to do that.

## **What if the KanCare health plan doesn't pay for a service I've received?**

Each KanCare health plan has a way for you or your doctor to appeal decisions the plan makes about the services you think you need. The health plan will explain how you do that. They will also provide you a Member Advocate who can help you. You can also file an appeal with the state agency that oversees KanCare (Kansas Department of Health & Environment - KDHE).

## **What if I have a complaint?**

You should call the KanCare health plan's customer service number, talk to your care manager or file a written grievance. The handbook you will receive explains how to do that.

## **Will consumers have any say in how KanCare operates?**

Yes. Each KanCare health plan must have a Member Advisory Council, made up of people who receive services or their families. People who receive services are also represented on the Governor's KanCare Advisory Council.



## WHAT'S COVERED?

NOW	JANUARY 2013
Medicaid, HealthWave, HealthConnect	KanCare
<ul style="list-style-type: none"> <li>• Doctors</li> <li>• Hospitals</li> <li>• Medications</li> <li>• Home health services</li> <li>• Mental health services</li> <li>• Substance use disorder services</li> <li>• In-home services, like:               <ul style="list-style-type: none"> <li>○ Personal attendants</li> <li>○ Respite services</li> <li>○ Other in-home help</li> </ul> </li> <li>• Nursing home stays</li> <li>• Transportation to and from medical appointments</li> <li>• Emergency transportation</li> <li>• Local health department services, like:               <ul style="list-style-type: none"> <li>○ Shots</li> <li>○ Well-child check-ups</li> </ul> </li> <li>• Dental services for children</li> <li>• Vision services</li> </ul>	<ul style="list-style-type: none"> <li>• Doctors</li> <li>• Hospitals</li> <li>• Medications</li> <li>• Home health services</li> <li>• Mental health services</li> <li>• Substance use disorder services</li> <li>• In-home services, like:               <ul style="list-style-type: none"> <li>○ Personal attendants</li> <li>○ Respite services</li> <li>○ Other in-home help</li> </ul> </li> <li>• Nursing home stays</li> <li>• Transportation to and from medical appointments</li> <li>• Emergency transportation</li> <li>• Local health department services, like:               <ul style="list-style-type: none"> <li>○ Shots</li> <li>○ Well-child check-ups</li> </ul> </li> <li>• Dental services for children</li> <li>• Vision services</li> </ul> <p><b>PLUS:</b></p> <ul style="list-style-type: none"> <li>• <b>Dental check-ups and cleanings for adults</b></li> <li>• <b>Care coordination for people with serious conditions, like diabetes, or complex needs, like more than one serious condition</b></li> <li>• <b>Extra services, like pet therapy, pest control, foot care, rewards for healthy behavior</b></li> </ul>



## **GOOD NEWS ABOUT KANCARE!**

- No co-pays
- Dental check-ups and cleanings for adults, as well as children
- Care managers or care coordinators for people with serious health conditions or complex needs
- Extra (value-added) services offered by each KanCare health plan, such as extra vision services, foot care, rewards for healthy behavior
- Same providers
- Same services
- Health homes to improve care and health for people with the most serious health problems



## KANCARE PROTECTIONS

- You can choose your KanCare health plan
- You can choose your doctor
- You can change your doctor
- If a doctor you need is only available in a different town, the health plan must provide you transportation
- A member advocate will help you file a complaint with your health plan
- Each health plan will have a group of members to advise them
- You will be asked how you like your health plan
- In future years, each health plan's report card will be given to you to help you choose your health plan



## WHAT DOES THIS MEAN?

**Behavioral healthcare** – These are services that are provided to treat mental illness or substance use disorder

**Beneficiary/consumer/member/patient** – These are all words that mean the person who is getting services.

**Care coordinator/care manager** – These are words that mean the person at the MCO/health plan who helps you understand your healthcare needs and talks with your doctors and other providers to make sure you get the care you need.

**Eligible/eligibility** – This means what allows you to get Medicaid.

**Home and community based services (HCBS)** – This means services you get in your home or in the town you live in to help you stay healthy where you live. Sometimes these are called in-home services or long term services and supports.

**HealthWave** – This is the current managed health care program for pregnant women, children and families. Coventry and Unicare are the health plans under HealthWave. HealthWave will go away after January 2013 and everyone in HealthWave will be in KanCare.

**HealthConnect** – This is a program, mostly in western Kansas that is sort of like HealthWave. People in HealthConnect will also go into KanCare.

**KanCare** – This is the new Medicaid program starting in January 2013 that will provide everyone with a managed healthcare plan through one of these companies:

- Amerigroup of Kansas
- Sunflower State Health Plan
- United Healthcare of the Midwest

**KDADS** – This is the Kansas Department on Aging and Disability Services. This is a new state agency created by joining some parts of other agencies together. KDADS manages the in-home services and supports, nursing home services and behavioral health care that are included in KanCare.

**KDHE** – This is the Kansas Department of Health and Environment. KDHE manages the KanCare contract with the health plans. KDHE also oversees the medical care, Working Healthy and WORK services that are part of KanCare.

**MCO/health plan** – This means one of the three companies that provides all KanCare services, including medical, pharmacy, dental, vision, mental health and substance use disorder, nursing home, and in-home services. For 2013, the first year, home and





community based services for people with intellectual/developmental disabilities and their targeted case management will not be provided by these plans.

**Medicaid** – This means the federal and state program that pays for health care services for children, pregnant women and families who are poor, people with disabilities, and elderly people who have low incomes. In January 2013, almost everyone served by Medicaid in Kansas will be in the KanCare program.

**Medicare** – This is the federal program, for elderly people and some people with disabilities that also pays for some health care services. Some people with Medicare also have Medicaid.

**Physical health care** – This means all medical services like doctors, hospitals, pharmacies, dentists and eye doctors, as well as any transportation needed to get to these services.

**Provider** – This means any person or agency that provides any of the physical health care services, behavioral health care services, nursing home services, or in-home services.